CJSAC Provides Expert Advice to Governor's Commission on Prison Overcrowding on Offender Assessment and Evidence-Based Practices

West Virginia is struggling with increased demand for prison beds like many other states. In January 2009, Governor Joe Manchin III established by executive order the Governor's Commission on Prison Overcrowding to review causes and make recommendations to remediate the issue. The Commission has looked long and hard at ways to divert offenders to community level corrections and to reduce length of stay for low risk offenders.

One particular approach the Commission is examining is the adoption of a single, validated risk and needs offender assessment tool to be utilized for felony offenders at every stage of the criminal justice process. The West Virginia Statistical Analysis Center has provided major guidance on the potential use of such instruments for decision-makers. As a Multi-Health Systems, Inc. certified Master Trainer for the Level of Service/Case Management Inventory (LS/CMI), Dr. Stephen Haas was called to present information to the Commission on how the use of such instruments as the LS/CMI could be used to assist in diversion and other prison population reduction strategies. The LS/CMI is the most recent version of the widely used Level of Service Inventory-Revised (LSI-R), a tool that measures the risk and need factors of late adolescent and adult offenders, and incorporates a case management function. Dr. Haas has provided training and consultation on the application and implementation of the LS/CMI to West Virginia and other states and local jurisdictions since becoming certified as a Master Trainer.

Based on analysis of both state-funded Day Report Centers and Division of Corrections population data, Dr. Haas illustrated how risk assessments can assist in identifying segments of offender populations in both the community and prisons who may be more or less eligible for diversion and early release strategies. He also provided the Commission with information on actual sentence lengths and the average percent of minimum sentence served for state prisoners by offense groups. These statistics offered the Commission a glimpse of how long prisoners are currently serving beyond their minimum parole eligibility date. By combining information on both the prisoner risk levels and time served, Dr. Haas was able to preliminarily illustrate for the Commission that there was no statistical difference in the likelihood of recidivism for offenders serving less than and more than 120% of their minimum sentence. It is anticipated that such information will advance the Commission's efforts to isolate effective back-end strategies for dealing with the expanding prison population.

The Commission is also looking to tie evidence-based practices, especially in areas of behavioral health, substance abuse and other matters relating to transitional and independent living in the community to resolve some of the pressure upon the prison system through the use of a standardized risk assessment. It is hoped that the use of such an instrument by all levels of decision-making will result in better supervision and treatment of offenders in the community prior to and after release from secure facilities. The West Virginia SAC has been the source of motivation for this effort insofar as it has been producing the annual prison population forecast showing that West Virginia would need to double its investment in prison beds by 2017—unless adequate services become available in the community to meet offender needs and reduce the need for prison beds. Dr. Haas' presentation titled, "Prison Population Reduction Strategies Through the Use of Offender Assessment: A Path Toward Enhanced Public Safety," can be viewed on our presentations page.